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SMART & BIGGAR*Intellectual Property & Technology Law*

To Fax no.: (571) 273-8300

Page 1 of: 11

Attention: Group Art Unit 2828
Examiner Minsun Oh HarveyP.O. Box 2999, Station D
55 Metcalfe Street, Suite 900
Ottawa, Canada K1P 5Y6Tel.: (613) 232-2486
Fax: (613) 232-8440

From: SMART & BIGGAR

Your file no.: 10/613,033

Date: December 6, 2005

Reply to Ottawa file no.: 50111-21CIP

Time:

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R. Allan Brett (Reg. No. 40,476)

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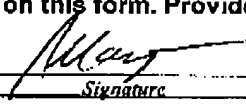
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DEC 06 2005

AMENDMENT TRANSMITTAL LETTER (Small Entity)					Docket No. 50111-21CIP /slr	
Applicant(s): NIMA AHMADVAND, ET AL						
Application No. 10/613,033	Filing Date July 7, 2003	Examiner Minsun Oh Harvey	Customer No. 07380	Group Art Unit 2828	Confirmation No. 9380	
Invention: SYSTEM AND METHOD FOR GENERATING MULTI-WAVELENGTH LASER SOURCE USING HIGHLY NONLINEAR FIBER						
<u>COMMISSIONER FOR PATENTS:</u>						
Transmitted herewith is an amendment in the above-identified application.						
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27						
The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	29 -	32 =	0	x \$25.00	\$0.00	
INDEP. CLAIMS	1 -	4 =	0	x \$100.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 19-2550 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
 R. Allan Brett Reg. No. 40,476			Dated: December 6, 2005 <div style="border: 1px solid black; padding: 5px;"> I certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ _____ (Date) _____ Signature of Person Mailing Correspondence _____ Typed or Printed Name of Person Mailing Correspondence </div>			
Tel: (613) 232-2486 CC:						

P11SMALL/REV09

DEC 06 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 10/613,033 Confirmation No. 9380
Applicant : NIMA AHMADVAND, ET AL
Filed : July 7, 2003
TC/A.U. : 2828
Examiner : Harvey, Minsun Oh

Docket No. : 50111-21CIP
Customer No. : 07380

Commissioner for Patents
Alexandria, VA 22313-1450
U.S.A.

Dear Sir:

In response to the Notice of Non-Compliant Amendment dated November 11, 2005,
please amend this application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this
paper.

Remarks/Arguments begin on page 9 of this paper.